



Phone: 312.563.0445
Fax: 312.563.0467
Email: namigc@aol.com
Website: www.namichicago.org

THE ALLIANCE ON MENTAL ILLNESS OF GREATER CHICAGO
NAMI CHICAGO • 1536 WEST CHICAGO AVENUE, 1ST FLOOR • CHICAGO, IL 60642

January 17, 2013

Comments of NAMI Chicago on 1115 Waiver

Children's Mental Health:

The financial and emotional cost of caring for children who fulfill the eligibility requirements for residential treatment under Rule 135 can be prohibitive for most parents and legal guardians. There is an alarming trend where parents and legal guardians are voluntarily surrendering their parental rights in order to obtain the level of care their children need. This is detrimental to the wellbeing of the family and child. Residential care is often what children with behavioral health and serious mental illness (major depressive disorder, bipolar disorder, and schizophrenia) need. NAMI Chicago recommends that provisions for residential care are included in the 1115 waiver.

While residential treatment is required at times, NAMI Chicago unequivocally believes in the right for a person to live in the least restrictive environment. Under the new Mental Health Parity laws, mental health is to be covered equally with medical health. Under the current Katie Beckett Waiver in Illinois, services are limited to medically fragile and technology dependent children. This takes the perspective that children suffering from medical ailments are entitled to a standard of care that allows them to live as independently as possible through Home or Community Based Care (HCBS). NAMI Chicago recommends that children with significant mental health treatment needs be included under the Katie Beckett Waiver through the 1115 waiver. This will follow the spirit of treating mental health needs equally with medical health needs. Illinois should look to other States - including, but not limited to, Maine and Wisconsin - that include mental health needs in the eligibility standards under their Katie Beckett waiver services.

Criminal Justice:

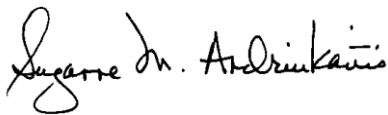
Anywhere from 2500-3000 inmates of Cook County Jail, are living with mental illness and/or substance abuse. The cost to keep a person in Cook County is \$143 a day and detainees with SMI can cost up to 2-3 times that amount (O'Shea, 2012). The cost to provide intensive care through HCBS is significantly lower. According to a report by Thresholds, the cost for a person to receive annual care through Assertive Community Treatment (ACT) is \$10,243, or around \$28 a day. ACT refers to a multidisciplinary team approach to service delivery designed for enabling people with severe and persistent mental illness to live in normalized community settings.

To help prevent many individuals living with mental illness from churning through the Criminal Justice System every year, reentry services should be included in the 1115 waiver. Evidence based practices such as ACT teams and Supported Employment, an individualized approach to aid people with SMI to maintain gainful employment, are essential for helping persons living with SMI (Kukla & Bond, 2013).

Supportive Housing:

Persons living with mental illness and or substance abuse constitute roughly two thirds to a quarter of the homeless population nationwide. This accounts for tens of thousands of people who are homeless nationwide that are experiencing mental illness and/or substance abuse and gross trauma. The 2013 Annual Homeless Assessment “Point in time Estimates” Report (AHAR) to Congress reports that there were 13,425 people in Illinois that were homeless. This means that at minimum there are 3,000 people living with a mental illness who were homeless in January 2013. NAMI Chicago therefore, recommends that the evidenced based practice of Supported Housing, which is “Long term, decent, safe, and affordable housing coupled with community-based mental health services” (Wong & Lee, 2013) be included in the 1115 waiver. NAMI Chicago believes that stable housing is a crucial component in a person’s journey towards wellness, is best practice for providing care for people with mental illness (Tsembris & Henwood, 2013), and should be included in the 1115 waiver.

Thank you for the opportunity to share our comments on the 1115 waiver and for considering our recommendations.



*Suzanne Andriukaitis, M.A., LCSW
Executive Director*



*Alexa James, M.S., LCSW
Associate Director*

